

County of San Bernardino  
Department of Economic and Community Development

**Community Needs Identification Questionnaire**

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Every five years, the County of San Bernardino prepares a Consolidated Plan to provide guidance on the use of community, economic, housing and homelessness assistance grants. These grants will come from the U.S. Department of Housing and Urban Development (HUD) to the County during fiscal years 2005-06 through 2009-10. The County Department of Economic and Community Development (ECD) is seeking information from County residents about neighborhood issues and needs in the unincorporated communities, and in the Cities of Adelanto, Barstow, Big Bear Lake, Colton, Grand Terrace, Highland, Loma Linda, Montclair, Needles, Redlands, Twentynine Palms, Yucaipa, and the Town of Yucca Valley. The information from this questionnaire will be compiled along with other questionnaire responses into a Community Needs Report to the County Board of Supervisors in February 2005. Information from the report will be used to guide the formulation of strategies in the Consolidated Plan, for effective use of the federal funds for programs and projects to meet priority community needs. Your time and thoughtfulness is appreciated.

**A. HOUSING NEEDS**

1. City or Community of Residence: \_\_\_\_\_
2. Length of time at current residence: \_\_\_\_\_
3. Annual Household Income:     ☐ \$0-\$15,000   ☐ \$15,000-\$25,000   ☐ \$25,000-\$35,000  
   ☐ \$35,000-\$45,000   ☐ \$45,000-\$55,000   ☐ \$55,000 +
4. Size of household: \_\_\_\_\_ persons
5. Age of head of household: \_\_\_\_\_ years
6. Household is headed by:       ☐ Male           ☐ Female  
   ☐ Elderly       ☐ Handicapped
7. Number of Children in the Household: \_\_\_\_\_
8. Ethnicity:       ☐ White                   ☐ Hispanic                   ☐ Native American  
(Optional)       ☐ Afro-American       ☐ Asian                   ☐ Other: \_\_\_\_\_
9. Do you   ☐ **own** or   ☐ **rent** your home?  
If you rent is it a   ☐ **house** or an   ☐ **apartment**?
10. Do you think there are sufficient affordable housing opportunities present in your community?   ☐ Yes       ☐ No
11. What do you perceive to be the greatest obstacle to developing affordable housing in your community? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Do you feel enough is being done to provide residents in your community with affordable housing opportunities? Why or why not? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**HOUSING NEEDS (continued)**

13. What do you feel could or should be done to encourage the development of affordable housing? \_\_\_\_\_  
\_\_\_\_\_
14. Please list the top five housing-related issues in your community?  
a) \_\_\_\_\_ b) \_\_\_\_\_ c) \_\_\_\_\_  
d) \_\_\_\_\_ e) \_\_\_\_\_
15. Are you interested in exploring homeownership opportunities? ☐ Yes ☐ No
16. Are you aware of the County's Homeownership Assistance Program? ☐ Yes ☐ No
17. Would you like a brochure? ☐ Yes ☐ No  
If yes, please call (909) 388-0900 to request that a brochure be mailed to you.
18. If you own your home, are you aware of the County's Housing Preservation Program?
19. Would you like a brochure? ☐ Yes ☐ No  
If yes, please call (909) 388-0925 to request that a brochure be mailed to you.

**B. COMMUNITY DEVELOPMENT NEEDS**

Please fill in the spaces that pertain to the kinds of needs, issues, problems or opportunities you see in your local community, that are related to public facilities and buildings, community appearance, and the quality of life in your community.

1. Community Facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Facility Access for Persons with Disabilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Transportation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Fire Protection: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Education: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**COMMUNITY DEVELOPMENT NEEDS (Continued)**

6. Child Care: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Health Care: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Recreation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Code Enforcement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Community Services for Youth, Elderly, or Disabled Persons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Social Services: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Blight Removal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Water and Sewer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
14. Job Opportunities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you have a question, call (909) 388-0959. Please turn in this survey at a Community Needs Identification Forum, or send it to the following address by December 10, 2004:

**County of San Bernardino  
Department of Economic and Community Development  
290 N. "D" Street, Sixth Floor  
San Bernardino, CA 92415-0040  
Attn: Program and Compliance Section**